PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004  Application or Docket Number 10/528254														
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY			
U.S. NATIONAL STAGE FEES				·				RATE	FEE		RATE	FEE		
BASIC FEE			SMALL ENT. = \$ 150		LARGE.ENT. = \$ 300		[	BASIC FEE		OR	BASIC FEE	300		
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		All other situations # \$ 100 / \$ 200			EXAM FEE			EXAM FEE	202		
SEARCH FEE			U.S. is ISA = \$50/\$100 ALL other countries = \$200/\$400		All other situations = \$ 250 / \$ 509			SEARCH FEE			SEARCH FEE	500		
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$ 125 =			X \$ 250 =			
TOTA	L CHARGEABL	// minus 20 =		•			X \$ 25 =		OR	X \$ 50 =				
INDEPENDENT CLAIMS			√2 minus 3 =		•			X \$ 100 =		OR	X \$ 200 =			
MULT	IPLE DEPEND	ENT CLAIM PRI	ESENT					+\$ 180 =		OR	+\$ 360 =		Gian	
MULTIPLE DEPENDENT CLAIM PRESENT  * If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL  OR  TOTAL												יחקץ		
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY														
1 2	3 17/05	CLAIMS REMAINING AFTER AMENOMENT		PREVI	EEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	13	Minus	-2	0	-~		X\$25=		- OR	X 6 50 =			
	Independent	• 2	Minus	000	3	• ~		X \$ 100 =		OR	X \$ 200 =		]	
\$	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLABA			+\$ 180=		OR		$D^{-}$	1	
H	7 1							TOTAL ADDIT	•	OF	TOTAL ADDIT		+	
S(W) (Column 1) (Column 2) (Column 3)													4	
۰		CLAIMS REMAINING AFTER AMENDMENT		PREV	HEST MBER MOUSLY O FOR	PRESENT EXTRA	١,	) RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	4	
ğ	Total	• 13	Minus	-20	)	=	$\mathbf{I}/$	X\$25=	1/_	OF		ļ	4	
AMENDMEN	independent	• 2	Minus	C	<u> </u>	8	$I \setminus$	X \$ 100 =	11-	Jor			-1	
*	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>J</b> `	+\$ 180=			TOTAL ADDR		4	
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".														

FORM PTO-475 (Rev. 02/2005)

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